Utah Influenza Report

This report contains data through the week ending 11/10/2012 (MMWR week 45).

UTAH DEPARTMENT OF HEALTH
Communicable Disease Analysis & Reporting Program

Overview of Influenza Surveillance: Surveillance for the 2012-2013 influenza season officially began on September 30, 2012. The Utah Department of Health publishes a weekly report throughout the active influenza season that synthesizes data from a variety of sources to give the most complete and up-to-date picture of influenza activity in the state of Utah. Data in this report should be considered provisional, and may change as more complete reports are recieved.

Influenza-like Illness (ILI): The U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) is a national system that conducts surveillance for influenza-like illness (ILI) in outpatient healthcare facilities. ILINet providers report weekly the total number of patients seen for any reason and the number of patients seen with ILI (defined as a fever ≥ 100° F and a cough or sore throat). These data are used to determine the amount of ILI circulating in the community, as well as provide insight into regional differences in ILI activity. Currently, more than 50 facilities throughout Utah participate in ILINet.

Figure 1. Weekly Influenza-like Illness Activity
Influenza-like illness (ILI) activity as measured by the number of standard deviations from the epidemic threshold - Utah, 2012-2013

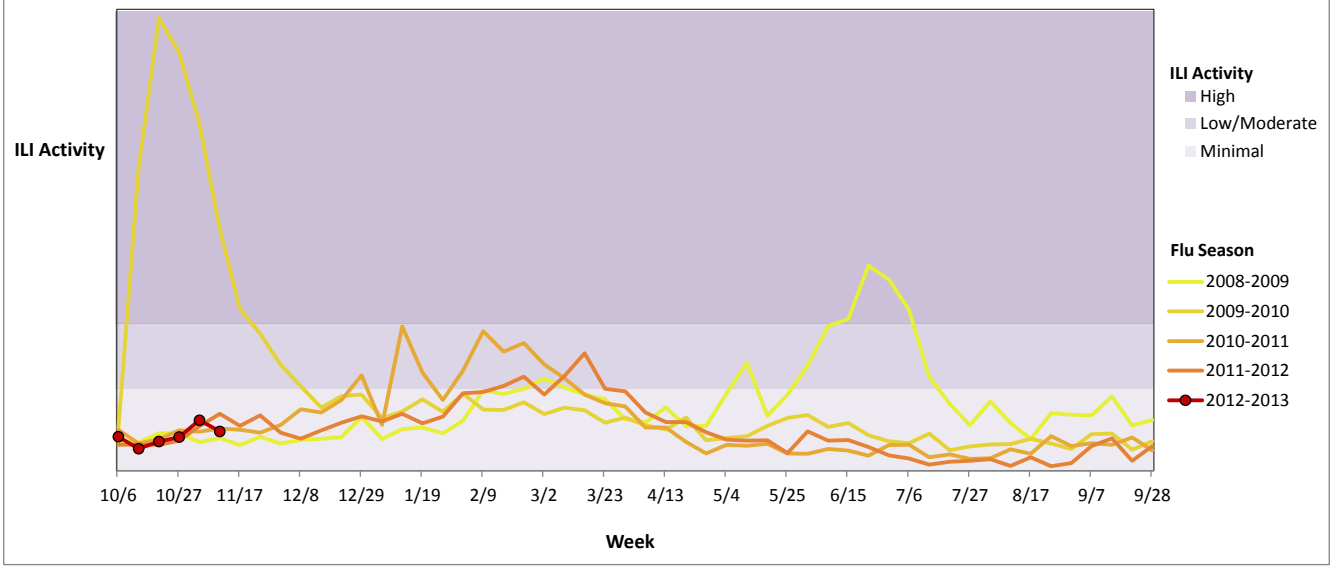

Table 1. Influenza-like Illness (ILI) Activity Levels by Health District - Utah, Current Week

Health District	ILI Activity
Bear River	Minimal
Central	Minimal
Davis	Minimal
Salt Lake	Minimal
Southeastern	No Data
Southwest	Minimal
Summit	Minimal
Tooele	Minimal
TriCounty	No Data
Utah	Minimal
Wasatch	Minimal
Weber-Morgan	Minimal
State	**Minimal**

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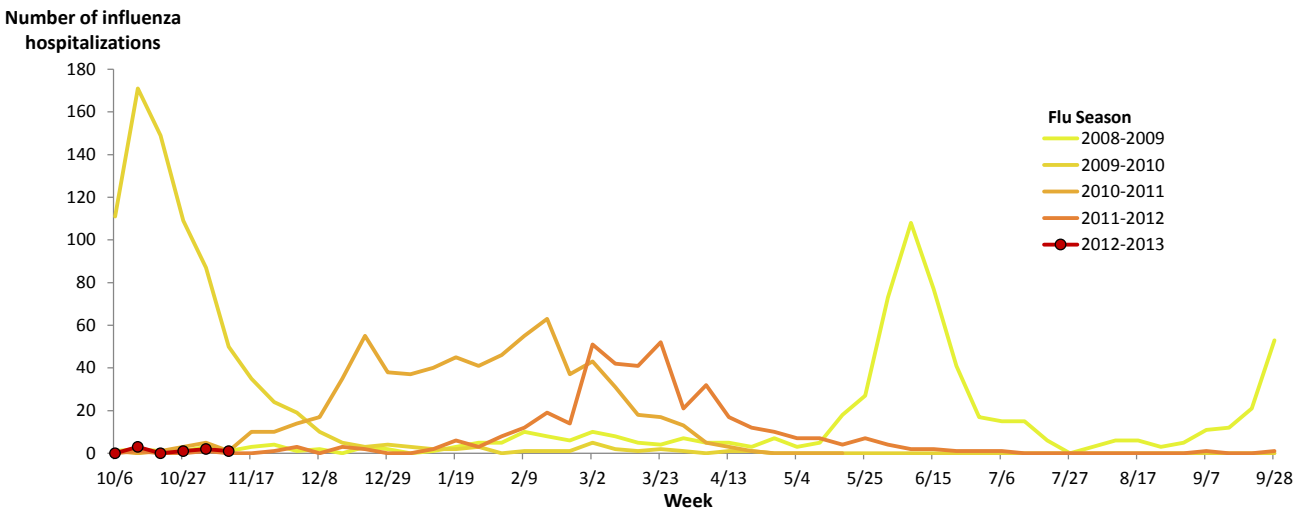
Influenza Hospitalizations: Influenza hospitalizations are a reportable condition in Utah. A person meets the case definition for an influenza hospitalization if they are hospitalized for any length of time and have an influenza positive serology, DFA, PCR, or culture test (confirmed case) or a positive rapid influenza diagnostic test (probable case). Public health in Utah gathers a variety of data on influenza hospitalizations including clinical features, course of illness, risk and protective factors, and influenza type and subtype. Data from influenza hospitalizations allows public health in Utah to better understand subgroups of the Utah population that are most severely effected by influenza and help to guide prevention messages and interventions.

Figure 2. Influenza Hospitalizations
Number of influenza hospitalizations by event date* - Utah, 2012-2013



*Event date is calculated based on a hierarchy of dates: 1. onset date 2. specimen collection date 3. date reported to public health.

Table 2. Influenza Hospitalizations by Case Status - Utah

	Current Week		Season To Date	
Case Status	**Total**	**% of Cases**	**Total**	**% of Cases**
Confirmed	1	100.0	7	100.0
Probable	0	0.0	0	0.0
Total	**1**	**100.0**	**7**	**100.0**

Table 3. Influenza Hospitalizations by Health District - Utah

Health District	Current Week	Season To Date
Bear River	0	0
Central	0	0
Davis	0	3
Salt Lake	1	3
Southeastern	0	0
Southwest	0	0
Summit	0	0
Tooele	0	0
TriCounty	0	0
Utah	0	1
Wasatch	0	0
Weber-Morgan	0	0
State	**1**	**7**

Table 4. Influenza Hospitalizations by Age Group - Utah, Season To Date

Age Group	Total Cases	% of Cases	Rate*
0-4	1	14.3	0.37
5-24	3	42.9	0.32
25-49	0	0.0	0.00
50-64	1	14.3	0.25
65+	2	28.6	0.81
Total	**7**	**100.0**	**0.25**

*Rate is calculated as the number of cases per 100,000 population

Table 5. Influenza Hospitalizations by Sex and Race - Utah, Season To Date

Variable		Num. of Cases	% of Cases	% in Utah Pop	p value*
Sex	Male	3	42.9	50.3	0.6936
	Female	4	57.1	49.7	0.6936
	Unknown	0	0.0	NA	--
Race	White, Not Hispanic	5	71.4	82.0	0.4646
	Hispanic	2	0.0	11.6	0.1603
	Native Hawaiian/Pacific Islander	0	0.0	0.7	0.8271
	Black/African American	0	0.0	0.9	0.7974
	American Indian	0	0.0	1.1	0.7771
	Asian	0	0.0	1.9	0.7150
	Unknown	0	0.0	NA	--

*If a p value is ≤ 0.05, there is a significant difference between the percentage seen in influenza hospitalizations and the general Utah population.

Table 6. Summary Data for Influenza Hospitalizations - Utah, Season To Date

	Yes		No		Unknown	
Variable	Total	% of Cases	Total	% of Cases	Total	% of Cases
ICU	0	0.0	6	85.7	1	14.3
Ventilator	0	0.0	6	85.7	1	14.3
Died	0	0.0	7	100.0	0	0.0
Neurological Symptoms	0	0.0	6	85.7	1	14.3
Healthcare Worker	0	0.0	7	100.0	0	0.0
Pregnant	0	0.0	6	85.7	1	14.3
Heart Disorder	0	0.0	6	85.7	1	14.3
Blood Disorder	1	14.3	5	71.4	1	14.3
Kidney Disorder	1	14.3	5	71.4	1	14.3
Metabolic Disorder	2	28.6	4	57.1	1	14.3
Chronic Respiratory Disorder	2	28.6	4	57.1	1	14.3
Immunosuppressed	4	57.1	2	28.6	1	14.3
Neurological Disorder	0	0.0	6	85.7	1	14.3
Seizure Disorder	0	0.0	6	85.7	1	14.3
Bacterial Co-infection	0	0.0	6	85.7	1	14.3
Obese*	1	20.0	2	40.0	2	40.0
Morbidly Obese*	1	20.0	2	40.0	2	40.0
Risk Factor†	7	100.0	0	0.0	0	0.0
Vaccinated	4	57.1	0	0.0	3	42.9

*Obesity and morbid obesity is not considered for individuals under 18 years or pregnant women. Thus total counts will not equal the total number of influenza-associated hospitalizations

†Risk factors for influenza include: persons < 5 years, persons ≥ 65 years, pregnant women, and persons with a chronic medical condition.

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Student Absenteeism: School-age children are at high risk for respiratory virus infections, including influenza. Aggregate, all-cause absenteeism data is collected weekly from over 350 schools throughout Utah. These data are analyzed to identify elevated absenteeism rates that could indicate the circulation of influenza in school-age children.

Figure 3. Student Absenteeism by Week

Rates for absences due to all causes - Utah, 2011-2012 and previous 3 year average

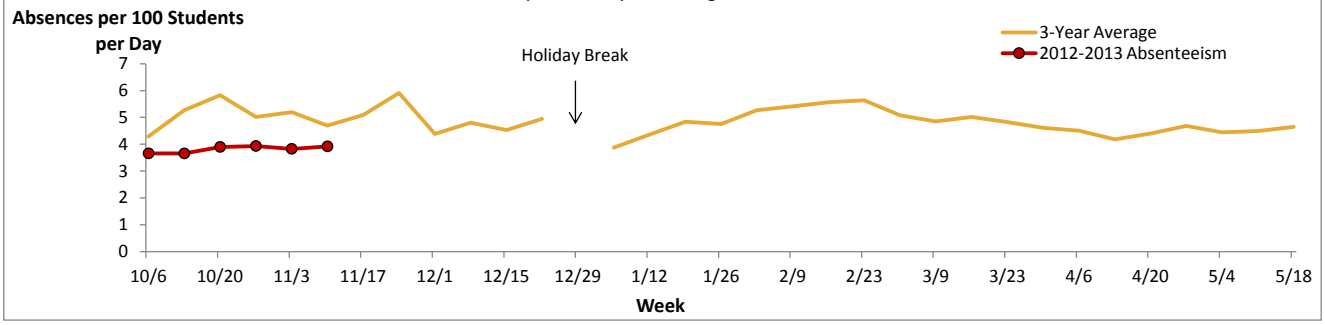


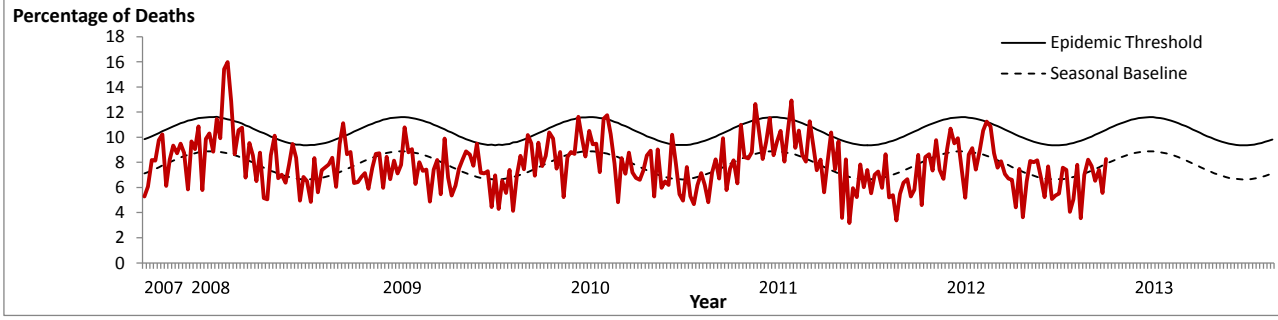
Table 7. Weekly Student Absenteeism - Utah, Current Week

Health District	Absences per 100 students/day
Bear River	2.9
Central	3.9
Davis	3.1
Salt Lake	3.8
Southeast	4.8
Southwest	4.1
Summit	3.9
Tooele	4.2
TriCounty	4.4
Utah	2.1
Wasatch	3.6
Weber-Morgan	5.7
State	**3.8**

Pneumonia and Influenza Deaths: Each week the total number of death certificates received and the number of those for which pneumonia or influenza was listed as an underlying or contributing cause of death is collected. The percentage of deaths due to pneumonia and influenza are compared with a seasonal baseline and epidemic threshold value calculated for each week. These data are used to monitor the severity of influenza illness in the community.

Figure 4. Pneumonia and Influenza Deaths

Percentage of deaths attributable to pneumonia and influenza by week of death - Utah, 2007-2013



http://health.utah.gov/flu ● 801-538-6191 ● epi@utah.gov

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Laboratory Surveillance: The Unified State Laboratory: Public Health recieves specimens from all over the state for comprehensive influenza testing. All specimens are tested to determine influenza type and subtype. A portion of specimens are also sent to the Centers for Disease Control and Prevention for addtional testing, including gene sequencing, antiviral resistance testing and antigenic characterization.

Figure 5. Influenza Positive Tests

Influenza positive specimens tested by Unified State Laboratory: Public Health - Utah, 2012-2013

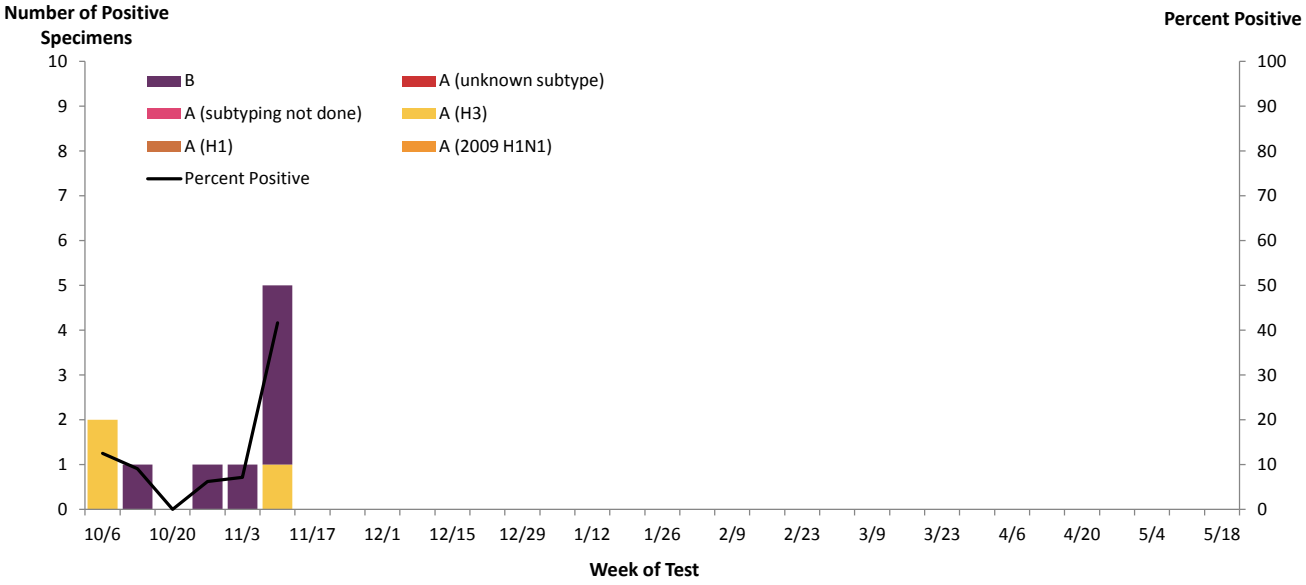

Table 8. Unified State Laboratory: Public Health Influenza Testing Data

	Current Week		Season To Date	
	Total	Percent	Total	Percent
Specimens tested	12	--	78	--
Positive specimens	5	41.7	10	12.8
Positive Specimens by Type/Subtype				
Influenza A	1	20.0	3	30.0
A (2009 H1N1)	0	0.0	0	0.0
A (H1)	0	0.0	0	0.0
A (H3)	1	100.0	3	100.0
A (subtyping not performed)	0	0.0	0	0.0
A (unable to subtype)	0	0.0	0	0.0
Influenza B	4	80.0	7	70.0

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